The state of the s

Under the Paperw		Si	ibstitute for Fo	DETERMINA	TION RECO	RD	M ESSEND O	splays a valk	1 OMB control
	•						10	XX7	cket fluitour
•	CLAIMS:	AS FIL	ED - PART	1				701	
		(Cotumn	1)	(Column 2)	SM	ALL ENTITY	OI	_ (OTHER THAN
FOR. BASIC FEE	NU	NUMBER FILED				7		· . · s	MALL ENTIT
(37 CFR 1.16(a))				NUMBER EXTRA	RATE	FEE			
TOTAL CLAIMS		•		· .		395	.00	RAT	
(37 CFR 1.16(c))		min	us 20 = 4		x:25		OR	· .	1790
(37 OFR 1.16(b))	45	en lo	n 3 = .				OR	× .50	=
MULTIPLE DEPENDE	of or any				x.100	=	OR	x 200	5-1
			(37 CFR 1.16)		+:/80		7 ~		
' If the difference in co	olumn 1 is less	lhan zan	anter 10° la ac-	4.6		-	OR	+.36	01
					TOTAL	<u>L</u>	OR	TOTAL	
11/2 12 - CL	AIMŞ AS A	MEND	ED - PART I	Ų.				TOTAL	· L
/// <i>[[]</i>	(Column 1)		.· 		•			•	
A Y	CLAIMS		(Column) SMAL	LENTTY	OR	ОТ	HER THAN
	REMAINING AFTER	·]	HIGHES . NUMBER	R PRESENT	.	1	7	SMA	LL ENTITY
Total (30 OFR 1.16(a)) Independent (30 OFR 1.16(b))	WENDWENT		PREVIOUS PAID FOI	LY FYTRA	RATE	TIONAL	1	RATE	ADDI
Fotal (ar cert 1.16(al)	77	Klinu		71-2	-	FEE			TTONAL
Independent (SF OFR 1.16(b))	· 199	Mirita	1.75	0	1 235	1		50	TE.
\$	-7	.1			x=100	1	OR	×:50	11.00
FIRST PRESENTAT	TON OF WULTIP	LE DEPEN	DENT CLAIM (3)	7 CER 1 46/40	1	 	OR	× 200	1/201
					1 FARD	<u></u>	OR	+21013	72,22
• • •					TOTAL ADD'L FEE		1 . '	TOTAL	7000
	(Column 1)		(Column 2	2) (Column 3)			OR	ADD'L FEE	100
	CLAIMS REMAINING		HIGHEST . NUMBER		7				
	AFTER MENDMENT		PREVIOUSL	PRESENT Y EXTRA	RATE	ADDI-		RATE	T-
Total CN OR LIGO		Minus	PAID FOR	- 		TIONAL			TIONAL
Total • (SF CFR 1.16(d) • (SF CFR 1.16(b))		4.0		·	1:25		-	No.	FEE
(ST CHR 1.16(b))		Minus	•••	· E	100		OR -	×:50	
FIRST PRESENTATION	ON OF MULTIPLE	DEPEND	DOT ON ALLA SING.		×100		OR :	× 200	1
			G11 CLAIM (37)	CFR 1.16(d)	4:/10		OR .	+:360	
• •	•	٠.			ADD'L FEE		_	TOTAL	
	Column ()		(Ontone at		WORLEGE [DO'L FEE	
	CLAIMS		(Column 2) HIGHEST	(Column 3)			•	. '	
l R	EMAINING AFTER	٠.	NUMBER	PRESENT	RATE	ÁDD:			
Total 4	CENDMENT		PREVIOUSLY PAID FOR	EXTRA		ADDI- TIONAL	ľ	RATE	ADDI-
(37 OFR 1.16(d)		Minus	**	=	1-25-1	FEE			TIONAL FEE
Independent (27 CFR 1.16(b))		Minus .	***	-	×185		OR X	50	
				1	× 100'				
FIRST PRESENTATION	OF MULTIPLE	DEPENDE	NT CLAIM (37 CF	R 1.16(d))	[//6n+		OR X	2004	
					1+5/4()		OR' +	:200	
If the entry in column If the "Highest Numb If the "Highest Number	1 is less than	ho onto	la actua		TOTAL ADD'L FEE		TO	TAL	
If the Highest Number of the Highest Number	or Province D	ALIA CALINIX	iii column 2, will	e "C'dn column 3, is less than 20, en is less than 3, ent	<u>.</u> . L .	ا دی به	∪r AD	DEFEE	i

The Highest Number Previously Paid For [Total or Independent] is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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